

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Decryption System For Encrypted Display

the specification of which

(check one) ☒ is attached hereto.

☐ was filed on _____ as U.S. Application Serial No. or PCT International Application No. _____.

☐ and/or that was amended on _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate(s) listed below and have also identified below any foreign application(s) for patent or inventor's certificate(s) having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)

(Country)

(Day/Mon/Year Filed)

☐ Yes ☐ No

I hereby claim benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing Date)

(Status)

POWER OF ATTORNEY: As a named inventor I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

NAMES

REGISTRATION NUMBERS

Manny W. Schechter	31,722
Lauren C. Bruzzzone	35,082
Christopher A. Hughes	26,914
John E. Hoel	26,279
Joseph C. Redmond, Jr.	18,753
Paul J. Otterstedt	37,411
Douglas W. Cameron	31,596
Stephen C. Kaufman	29,551
Daniel P. Morris	32,053
Louis J. Percello	33,206
Marian Underweiser	46,134
Robert M. Trepp	25,933
Louis P. Herzberg	41,500
Richard M. Ludwin	33,010
Marc A. Ehrlich	39,966
Robert P. Tassinari	36,030
Derek S. Jennings	41,473
Gail H. Zarick	43,303
Timothy M. Farrell	37,321

SEND CORRESPONDENCE TO:

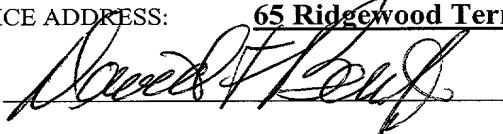
Customer No. 29,683

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR:	LAST NAME <u>Bantz</u>	FIRST NAME <u>David</u>	MIDDLE NAME <u>F.</u>
RESIDENCE & CITIZENSHIP:	CITY & STATE OR COUNTRY <u>Chappaqua, NY</u>	CITIZENSHIP <u>USA</u>	

POST OFFICE ADDRESS: 65 Ridgewood Terrace, Chappaqua, NY 10514

Signature



Date

2/19/2002

FULL NAME OF INVENTOR: LAST NAME Chefalas FIRST NAME Thomas MIDDLE NAME E.

RESIDENCE & CITIZENSHIP: CITY & STATE OR COUNTRY Somers, NY CITIZENSHIP USA

POST OFFICE ADDRESS: 214 Briarwood Drive, Somers, NY 10589

Signature Thomas E. Chefalas Date 2/19/2002

FULL NAME OF INVENTOR: LAST NAME Karve FIRST NAME Alexei MIDDLE NAME A.

RESIDENCE & CITIZENSHIP: CITY & STATE OR COUNTRY Mohegan Lake, NY CITIZENSHIP India

POST OFFICE ADDRESS: 692 Panorama Drive, Mohegan Lake, NY 10547

Signature Alexei Karve Date 2-19-2002

FULL NAME OF INVENTOR: LAST NAME Mastrianni FIRST NAME Steven MIDDLE NAME J.

RESIDENCE & CITIZENSHIP: CITY & STATE OR COUNTRY Unionville, CT CITIZENSHIP USA

POST OFFICE ADDRESS: 15 Great Oak Lane, Unionville, CT 06085

Signature Steven J. Mastrianni Date 2-19-02

FULL NAME OF INVENTOR: LAST NAME Mohindra FIRST NAME Ajay MIDDLE NAME _____

RESIDENCE & CITIZENSHIP: CITY & STATE OR COUNTRY Yorktown Heights, NY CITIZENSHIP India

POST OFFICE ADDRESS: 1340 Lynn Court, Yorktown Heights, NY 10598

Signature Ajay Mohindra Date 2-19-02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Bantz Et Al.
Serial No.: Not Known Yet
Filing Date: Herewith
Examiner: Not Yet Assigned
Attorney Docket No.: YOR920010530US1
Title: "Decryption System For Encrypted Display"

Assistant Commissioner For Patents
Washington, DC 20231

ASSOCIATE POWER OF ATTORNEY

Dear Sir:

Please recognize all attorneys associated with **Customer No. 29683** as associate attorneys with full and complete powers to prosecute this patent application and to transact all business in the Patent and Trademark Office connected therewith.

Please address all correspondence to **Customer No. 29683**.

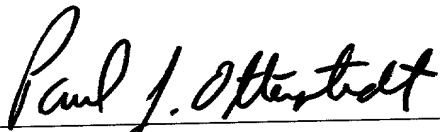
Please direct all telephone calls to:

Mark F. Harrington
Telephone No.: (203) 366-4084
Facsimile No.: (203) 366-4109

Respectfully Submitted,

Feb. 20, 2002

Date



Paul J. Otterstedt
Reg. No.: 37,411
IBM Corporation
IP Law Department
Yorktown Heights, NY 10598